

**NOTICE TO COURT  
AND DISTRICT ATTORNEY**

Date

The Honorable  
Judge  
Address

District Attorney  
Parish of  
Address

RE:  
DOB:  
DOCKET:  
PARISH:

PARENT / RESPONSIBLE PARTY (S):

Dear Judge \_\_\_\_\_ and District Attorney:

Temporary furloughs serve as a rehabilitative tool to assist our youth in maintaining family and community relations. Eligibility criteria include the youth's committing offense, custody classification status, disciplinary record, educational progress, program participation, family involvement and furlough history.

In accordance with Louisiana Revised Statute 15:908, this letter serves to advise the Court of (youth's name) eligibility for (Type of Furlough). According to LSA R.S. 15:908, a furlough cannot be granted to this youth if Youth Services is notified of an objection by the Court or District Attorney without a contradictory hearing.

(youth's name) meets the criteria established by Youth Services for a (Type of Furlough) Furlough for a period of \_\_\_\_\_ and has been deemed eligible for such by the Director at (Name of Facility) for Youth and/or the Deputy Secretary of Youth Services. This furlough is scheduled to begin at (Time) on (Date) and end at (Time) on (Date) and will take place in \_\_\_\_\_, Louisiana.

If (Youth's name) loses his/her eligibility for the above referenced furlough prior to the date the furlough period is to begin, the recommendation for furlough leave will be withdrawn and the furlough will be cancelled.

The Honorable \_\_\_\_\_  
District Attorney

RE:  (Youth's name)

Please indicate below whether there is an objection to furloughing this youth. It is kindly requested that this form be returned by  (Date)  to the following Fax number: \_\_\_\_\_.

If additional information is needed, please advise.

Respectfully,

Deputy Secretary

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**To be completed by the Court with regards to the furlough:**

\_\_\_\_\_ I Object.

\_\_\_\_\_ I Do Not Object.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Date Received by the Facility: \_\_\_\_\_

**To be completed by the District Attorney with regards to the furlough:**

\_\_\_\_\_ I Object.

\_\_\_\_\_ I Do Not Object.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Date Received by Facility: \_\_\_\_\_